

2001 UNIFORM BUSINESS REPORT (UBR)

0020476 SP

DOCUMENT # A22901

1. Entity Name
SES GROUP - GRANADA ASSOCIATES, LTD.

Principal Place of Business P.O. BOX 0956 MIAMI FL 33256-0956	Mailing Address P.O. BOX 0956 MIAMI FL 33256-0956
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2. Principal Place of Business PO Box 560956 Suite, Apt. #, etc.	3. Mailing Address P.O. Box 560956 Suite, Apt. #, etc.
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City & State Miami, FL	City & State Miami, FL	4. FEI Number 59-2815144	Applied For <input type="checkbox"/> Not Applicable
Zip 33256-0956	Country USA	Zip 33256-0956	Country USA

6. Name and Address of Current Registered Agent

AVERBACHER, MARK S
1200 BRICKELL AVE., SUITE 1720
MIAMI FL 33134

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
2699 So. Bayshore Drive
Seventh Floor
City
Miami FL Zip Code
33133

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Mark S. Averbacher* (Mark S. Averbacher) DATE 4/26/01

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Capital Contributions as Shown on record. \$200.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.


12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	CLANCEY, PETER J.	CITY-ST-ZIP	400004211474--0
STREET ADDRESS	16921 S.W. 80TH COURT		-05/11/01--01058--005
CITY-ST-ZIP	MIAMI FL 33158		***141.25 ***141.25
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STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Peter J. Clancy* DATE 4/22/01 (305) 235-4713

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED
01 APR 27 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E003 (11/00)